GUIDELINES FOR ADDRESSING PREGNANCIES AND NEW BABIES

These guidelines are to be used when a pregnancy or new birth is a factor in a report of child abuse, a CPS assessment or during ongoing case management. These guidelines do not take the place of administrative rule. The purpose of the guidelines is to assist department staff in addressing child safety in these circumstances by outlining additional considerations and steps to take. It is critical to always look at the circumstances of both parents and to not limit your focus to the mother.

Making screening decisions, assessing child safety and coordinating case planning have additional challenges when there is a pregnancy or new baby in the client family. Oftentimes in these situations the worker is required to make decisions when the parent or caregiver has had limited or no chance to demonstrate abilities or inabilities related to parenting the new baby. Of course, with sufficient safety related information gathered sound decision making can still occur.

Criteria and Conditions for Utilizing the Guidelines:
These guidelines focus on considerations, and specific steps to take, in the following situations:

- A report of child abuse includes information that a parent or caregiver whom is alleged to be a perpetrator now or was in the past is pregnant or has a new baby.
- A parent or caregiver is pregnant or has a new baby and has an open child welfare assessment or case due to an existing present danger safety threat or impending danger safety threat (the threat may be being managed by an in-home or out-of-home protective action plan, initial safety plan, or ongoing safety plan).
- A parent or caregiver is pregnant or has a new baby and a parent or caregiver in the household has a current Termination of Parental Rights (TPR) petition filed against them, or previously had their parental rights terminated or relinquished.
- A teen, currently in the custody of the Department (who may be residing in home or may be placed out of the home), is pregnant or has a new baby.

Screening:
When a report of child abuse includes information that a parent or caregiver is pregnant or has a new baby, follow OAR 1-AB.2, "Screening", gather information about the following and consider the information when making screening decisions:

- Department and criminal history. Is there historical information about unsafe behaviors or circumstances that reportedly have not changed? Or maybe there is no information to indicate whether change has occurred.
- TPR/Voluntary Relinquishment. Does any individual in the household who will have the role of caregiver have a history of TPR or relinquishments? If so, does the reported information allege similar behaviors similar to those that resulted in the individual not parenting in the past?
- Current behaviors, conditions and circumstances.
    - **Prior to birth.** When the report is of a pregnancy, gather information about prenatal care, the identity of the prenatal care provider, other children in the home and current circumstances for other children in the home.
    - **In the hospital.** When the baby is still in the hospital, gather information about circumstances prior to birth (see above), bonding/attachment, the discharge plan, baby and mother drug screens, drug effects and behavior in the hospital.
    - **At home.** When the new baby is in the home, gather information about circumstances prior to birth and in the hospital (see above), how the baby is doing since the birth, parental behavior, the home environment, the dynamics with other children in the home, and pediatric visits.
    - **Open assessment or open case.** When the family has an open assessment or an open case with an identified safety threat, gather information about what safety threats are identified, how they are being managed and how they will impact a new baby. Also, how having a new baby may impact how the safety threats are managed for the other children.
- Collateral contacts. Individuals to consider contacting include the prenatal care provider, pediatrician, tribe, hospital social worker, the past case worker and/or supervisor when the case is closed and the

current case worker/supervisor when an assessment or case is open.

- Native American Ancestry. Ask the reporter about possible Indian or Alaskan Native heritage.

Reminders when considering closing at screening…

- When the report relates to an expectant mother and there are no children in the home refer to 413-015-0210(4)(C) for when the information must be closed at screening.

- When the information gathered at screening does not constitute a report of abuse or neglect, but would if the expectant mother had given birth, the screener may alert hospitals where the child may be born. The use of hospital-alert letters increases the likelihood the department is contacted at the time of the birth.

Reminder on open assessments and open cases…
Keep in mind that the screener is often times the first department staff person to receive new information on a client family. It is, therefore, critical for effective assessments, interventions and planning that the screener share information about pregnancies and new babies with the assigned case worker.

Assessment:
When a report of abuse or neglect is referred for CPS assessment, follow OAR 1-AB.4, "CPS Assessment" and take the following additional activities and guidance into consideration:

- Gather safety related information. Always ask the family what their plan is for the baby. Do not assume that the family's plan is inadequate. Any gaps in the family's plan will provide information on a parent's ability to protect and may assist the worker in identifying where intervention is needed.
- Disposition. When determining the disposition, the CPS worker and CPS supervisor must not make a dispositional finding related to abuse or neglect of a fetus. Regardless of the behavior of an expectant mother or potentially abusive partner, a child victim is required for all dispositions.

- Child Safety Decision. When determining child safety, if the children in the home are safe the assessment must be closed without providing services. If, however, there is reason to believe once the currently pregnant mother gives birth a newborn would not be safe (for example a parent has been successful with school aged children, but has never safely parented infants and toddlers and still appear unable) the worker can, despite closing the assessment, take steps now to assure the safety of the newborn at the time of the birth. These steps include:
    - Sending hospital alert letters
    - Preparing a protective custody affidavit
    - Creating a case note
- Ongoing Safety Plan. A decision to open a case and provide services must be due to unsafe children and not related to the pregnancy. A pregnancy or birth of a baby is a change in family circumstances that requires the worker to review the ongoing safety plan for adequacy.
- ICWA. Whether the information relates to an expectant mother or a new baby determine ICWA status and comply with ICWA if applicable. Specifically, remember an Indian child cannot be placed through the department through either a voluntary placement agreement or voluntary custody agreement within ten days of the birth of the Indian child.

Permanency/On-going Casework:

When working with a family who has an open case, the caseworker should consider the following when there is a pregnancy or new baby in the client family:

- If safety is being managed with an in-home safety plan, consider the impact of a new baby and whether the plan is sufficient.
- If safety is being managed with an out of home safety plan, consider whether the parent or caregiver is able to parent the new child in home or if an out of home placement will be necessary to assure the newborns safety. Department history or even other children in care does not automatically prescribe a specific plan for the newborn. The caseworker must look at the current circumstances and how they are uniquely occurring for each family.

Making a decision to allow a parent who is unable to parent one child, to

NO CHANGE I AM STILL WHITE

parent another requires the worker to articulate and document the basis for the decision.

- Re-check ICWA status as tribal enrollment frequently changes.
- If the expectant mother or other caregivers in the household have prior TPR's or relinquishments, review the circumstances and behaviors that resulted in the TPR or relinquishment to see if there has been change.

In order to be thoughtful and thorough it is recommended that the caseworker coordinate a staffing to discuss these considerations amongst other professionals. *See Pregnancy and New Birth Staffing section below.*

When the caseworker has information that a client is pregnant, it is important to begin planning. This will avoid a crisis at the time of the birth and is likely to result in more sound decision making.

If it is determined that department intervention is necessary at the time of the birth, whether that intervention is a referral for a new assessment to determine child safety or immediate removal due to aggravated circumstances (in which case ICWA still applies), the caseworker can take the following steps to increase the likelihood the department will be notified at the time of the birth:

- Request notification from the parent
- Request notification from family members and collaterals
- Send hospital alert letters
- Prepare an affidavit for protective custody when warranted and provide copies to screening and CPS staff.
- Coordinate with CPS. Let CPS staff know about the family and even request being contacted to go with CPS if an assessment is assigned. The prior relationship and history may be beneficial at the initial contact.
- Enter a case note titled, "New Baby Alert" and outline the plan if one is developed, the concerns and where the affidavit can be located if there is one.

Pregnancy or New Baby Staffing:

At assessment or during ongoing planning with a family it is always recommended to have a staffing when a client is pregnant or a new baby is

born into a client family. While a staffing can be beneficial at screening as well, it is less likely to be needed at screening when the report is related to an open assessment or case.

The purpose of the staffing is to discuss history and current circumstances in order to make decisions about and plan for the least intrusive intervention for the family without compromising safety of the newborn or other children in the home. The staffing is an opportunity to talk through the basis of the decisions, support those decisions with fact and allow for alternative perspectives to be shared and considered. The staffing does not eliminate the need to involve the family in planning.

- Who to invite: Who should be invited to the staffing depends on the individual family, who has worked with the family, who is familiar with the family and what expertise may be helpful considering the family's specific issues. Consider inviting the following:
    - The caseworker
    - The CPS worker (current and/or past)
    - Current worker's supervisor
    - CPS consultant
    - Program manager
    - Tribal representative (When ICWA applies always request input from the tribe)
    - ART team member if substance abuse is a concern
    - Domestic violence point person if domestic violence is a concern
- Considerations:
    - **OPEN CASE/IN-HOME ONGOING SAFETY PLAN.** In circumstances involving a current open case where children are being maintained at home with an in-home ongoing safety plan, have the current impending danger safety threats and the current ongoing safety plan available as a reference resource for the staffing. Key staffing questions include:
        - How will a newborn affect the management of the current impending danger safety threats?
        - Do the parents have the ability and willingness to protect the newborn, as well as other children in the home?
        - Is there anyone in the home, or any home circumstance, that would pose a different or additional threat to a newborn?

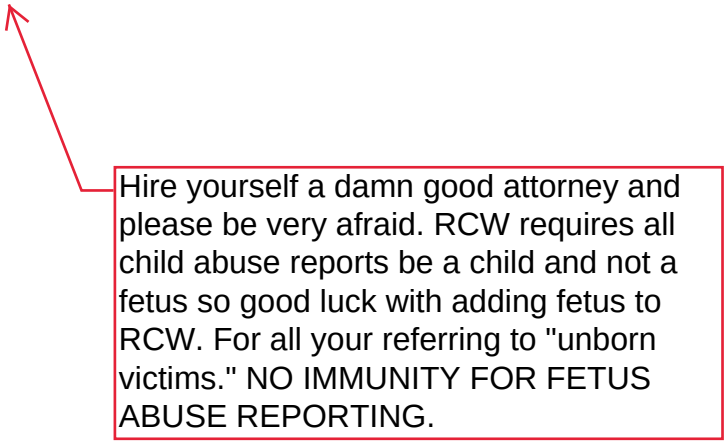
WOW LOOK AT THESE WOMEN HATERS SOCIAL WORKERS FAVORING THE FATHER AS ALWAYS SICK. Man always saves the day.....haters. Is the father a child molester who cares we hate women..

- What has the family done to prepare for the new baby?
  - Has there been prenatal care?
  - What is the family's plan for the new baby? Is it adequate?
- **OPEN CASE/OUT-OF-HOME ONGOING SAFETY PLAN.** In circumstances involving a TPR petition and/or children are currently out of the parent's care, have the current impending danger safety threats and current out-of-home ongoing safety plan available as a reference resource for the staffing. Remember that service completion does not equal child safety. Key staffing questions include:
  - If older children could not safely live with this parent, why would it be safe for a baby to remain in this parent's care?
  - Is the father of the new baby the same father of the children on the existing case?
  - If not, does is the father of the new baby willing and able to protect the new baby and help ensure the new baby is safe in the home?
  - Are the current circumstances different than the known history?
  - Can we articulate the specific differences?
  - In what circumstances would an in-home safety plan be appropriate?
- **Teen.** In circumstances involving a current open case, with an expectant teen in DHS custody, consider a staffing to determine the parents ability and willingness to protect (look at both parents) and to evaluate level of support. Key staffing questions include:
  - Does the teen have behaviors that may impact effective and safe parental functioning as a result of substance abuse, sexual offending, assaultive behavior or mental health?
  - What is the teen's plan for parenting?
  - Does the teen have the skills necessary for parenting?
  - Is the teen enrolled in any teen parenting classes to better prepare?
  - Who does the teen identify as support people?
- **TPR/RELINQUISHMENT.** In circumstances involving a prior TPR or relinquishments, have the past safety threats and the termination petition available as a reference resource for the

staffing. Key staffing questions include:

- When was the termination/relinquishment?
- What has changed, if anything, in regard to each of the previous concerns, since then?
- What are the current circumstances?
- Does the behavior that led to termination fall under aggravated circumstances?

- Documentation: The caseworker or supervisor should document the staffing in a case note in the department's electronic information system. Title the case note, "New Baby Staffing", so the information will be easily accessible. The following information should be included in the case note:
  - The date of the staffing
  - Who attended the staffing and their role
  - Any plan established as a result of the staffing
  - The justification for any plan. Focus on facts not opinions.
  - Next steps


Hire yourself a damn good attorney and please be very afraid. RCW requires all child abuse reports be a child and not a fetus so good luck with adding fetus to RCW. For all your referring to "unborn victims." NO IMMUNITY FOR FETUS ABUSE REPORTING.